

August 6, 2007

Los Angeles County **Board of Supervisors** 

> Gloria Molina First District

TO:

Each Supervisor

Yvonne B. Burke Second District

FROM:

Bruce A. Chernof, M.D.

Director and Chief Medica

Zev Yaroslavsky Third District

Don Knabe

Fifth District

SUBJECT:

GRADUATE MEDICAL EDUCATION QUARTERLY REPORT

SECOND CALENDAR QUARTER (APR-JUN) 2007

Fourth District Michael D. Antonovich

The Graduate Medical Education (GME) Quarterly Report for the second calendar quarter of 2007 is attached. Information contained in this report is compiled and reviewed by the Office of Clinical Affairs and Affiliations for all Los Angeles County sponsored residency training programs.

Bruce A. Chernof, MD Director and Chief Medical Officer

Status of Housestaff Placement at Martin Luther King, Jr.-Harbor Hospital (MLK-H)

John R. Cochran III Chief Deputy Director

Robert G. Splawn, MD

Senior Medical Director

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012

> Tel: (213) 240-8101 Fax: (213) 481-0503

> > www.ladhs.org

On November 1, 2006, the Charles R. Drew University of Medicine and Science notified the Accreditation Council for Graduate Medical Education (ACGME) of its decision to "voluntarily withdraw" from its role as primary institutional sponsor and to close all fifteen (15) ACGME-accredited residency training programs at MLK-H, effective July 1, 2007. On December 1, 2006, the University executed a plan to place its medical housestaff into educational rotations at other institutions allowing each to complete training requirements for the 2006-07 academic year. The total housestaff complement was two hundred fifty-three (253). Seventy-five (75) housestaff satisfied all training requirements for their residency program by June 30, 2007. An additional seven (7) housestaff will complete their training requirements "off-cycle" on or before November 1, 2007. The University also executed its plan to transfer the remaining medical housestaff, those not yet graduating, to new programs by July 1, 2007, allowing each to complete training program requirements for their specialty. One

hundred sixty-eight (168) found permanent placement and three (3) were not placed.

Information in the attached reports reflects the following:

To improve health through leadership. service and education. I. Total Housestaff Numbers by Facility (Attachment I)

1,479 (Academic Year 2007-2008) Total: LAC+USC 903

Harbor-UCLA 488 88 Olive View

II. Medical Specialty/Subspecialty Board Certification Results (Attachment II)

Medical specialty/subspecialty board certification results for 1,815 housestaff who completed County training programs from 2003 through 2006 are presented in this report. The next verification of board certification status will occur in October, 2007, and will include a final update of board certification achievement for 2004, updated results for 2005 and 2006, and incorporate new results for 523 housestaff who completed training in 2007. In recognition of the fact that Drew University

Each Supervisor August 6, 2007 Page 2

withdrew ACGME sponsorship at MKL-H effective July 1, 2007, certification reporting for MLK-H will continue until the 2007 candidates are eliminated from the three-year running totals.

III. Facility Compliance with Resident Supervision Guidelines (Attachment III)

First Quarter (July - September) of Fiscal Year 2006-07

System-wide audit results, excluding MLK-H, for eleven (11) of seventeen (17) resident supervision indicators met or exceeded the eighty percent (80%) compliance threshold however, opportunities for improvement continue to exist. Aggregate totals for six (6) indicators failed to meet the compliance threshold. Re-audits continue to closely monitor compliance in these areas. Facilities that demonstrated the best performance and/or a greater than fifteen percent (15%) improvement received cash awards for the purchase of equipment for patient care. In fiscal year 2005-06, a grand total of two-hundred thousand dollars (\$200,000) was awarded.

If you have any questions or need additional information, please let me know.

BAC:pd 506:015

Attachments

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors

### Los Angeles County Graduate Medical Education Programs, Accreditation Status and Housestaff Totals 2007-2008

#### LAC+USC Medical Center

#### **Status Program** Institution · Favorable Allergy & Immunology Anesthesiology Continued Full Accreditation Continued Full Accreditation Anes: Pain Management-Accredited USC Integrated Colon & Rectal Surgery Full Accreditation Full Accreditation ADA USC Integrated Dentistry Oral Maxillofacial Surgery Accredited ADA USC Intergrated Dermatology Full Accreditation **Emergency Medicine** Continued Full Accreditation Continued Full Accreditation USC Integrated Family Medicine Internal Medicine Continued Full Accreditation Int Med: Cardiology Continued Accreditation Int Med: Electrophysiology Initial Accreditation USC Integrated Int Med: Card-Intervent Accredited USC Integrated Int Med: Endocrinology Continued Accreditation Int Med: Gastroenterology Continued Accreditation Int Med: Geriatrics Continued Accreditation Int Med: Hematology Continued Accreditation Int Med: Infectious Disease Continued Accreditation int Med: Nephrology Continued Accreditation int Med: Oncology Continued Accreditation Int Med: Pulmonary Crit Care~ Continued Accreditation Int Med: Rheumatology Continued Full Accreditation Neurological Surgery Full Accreditation Neurology Clinical Neurophysiology Continued Full Accreditation Accredited Full Accreditation **Nuclear Medicine** Obstetrics & Gynecology **Probationary Accreditation** Ophthalmology Continued Full Accreditation Continued Full Accreditation Orthopaedic Surgery Ortho Surg: Hand Accredited Continued Full Accreditation Otolaryngology Pathology Continued Full Accreditation Cytopathology Continued Accreditation Hematopathology Continued Accreditation Neuropathology Continued Accreditation Selective Pathology Initial Accreditation **Pediatrics** Continued Full Accreditation Peds: Infectious Disease Accredited Peds: Medicine Accredited Peds: Neonatology Continued Accreditation Full Accreditation **Plastic Surgery** Plastic Surgery Hand Full Accreditation Continued Full Accreditation Psychiatry Psych: Child/Adolesc-Continued Accreditation Psych: Forensic Continued Accreditation Radiation Oncology Continued Full Accreditation Radiology — Rad; Neuro Continued Full Accreditation Accredited USC Integrated Rad: Vasc/Interv Accredited USC Integrated Continued Full Accreditation Surgery

#### Olive View-UCLA Medical Center

Full Accreditation Accredited USC Integrated

Full Accreditation

Full Accreditation

Chatue

Surgical Critical Care

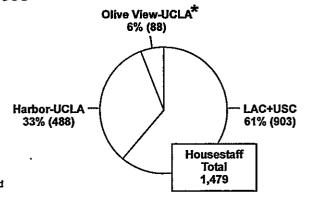
Drogram

Vascular Surgery

Thoracic Surgery Urology

i iogiani	Outuo
Institution ———	Not Required
Internal Medicine	Continued Full Accreditation
Int Med & Emergency Med	Continued Full Accreditation
Int Med: Hematology	Continued Full Accreditation
Int Med: Nephrology	Continued Full Accreditation
Int Med: Oncology	Continued Full Accreditation
Int Med: Rheumatology	Continued Accreditation

<sup>\*</sup>UCLA employed housestaff = 88 (County-sponsored, UCLA-employed)



#### Harbor-UCLA Medical Center

Program	Status
Institution	Favorable
Anesthesiology	Continued Full Accreditation
Emergency Medicine	Continued Full Accreditation
Emerg: Ultrasound ————	Accredited CASE
Family Medicine	Continued Full Accreditation
Family Med: Sports Med	Accredited
General Dentistry	Accredited ADA
Oral Maxillofacial Surgery	Accredited ADA
Internal Medicine	Continued Full Accreditation
Int Med: Cardiology ———	Continued Accreditation
Int Med: Electrophysiology	Continued Accreditation
Int Med: Card-Intervent	Accredited
Int Med: Dermatology	Provisional Accreditation
Int Med: Endocrinology	Continued Accreditation
Int Med: Hematology	Continued Accreditation
Int Med: Infectious Disease -	Continued Accreditation
Int Med: Oncology -	Continued Accreditation
Int Med: Nephrology	Continued Accreditation
Int Med: Pulmonary Crit Care	Accredited
Neurology ————	Continued Full Accreditation
Neuro: Child	Continued Accreditation w/Warning
Neuro: EEG	Accredited AEEGS
Obstetrics & Gynecology	Continued Full Accreditation
Maternal/Fetal	Accredited CREOG
	Accredited CREOG
Orthopaedic Surgery ————	Continued Full Accreditation
Ortho Foot & Ankle	Accredited
Pathology ————	Continued Full Accreditation
Pediatrics ————	Continued Full Accreditation
Peds: Critical Care	Continued Accreditation
Peds: Emergency Med	Continued Accreditation
Peds; Endocrinology	Continued Accreditation
Peds: Infectious Disease	Continued Accreditation
Peds: Neonatology	Continued Accreditation w/Warning
Psychiatry ————	Continued Full Accreditation
Psych: Child/Adolesc	Continued Full Accreditation
Radiology ————	Continued Full Accreditation
Rad: Body Imaging	Accredited ACR
Rad: Breast/Surgery	Accredited ACR
Rad: Neuro	Continued Accreditation
Rad: Nuclear	Accredited
Rad: Vasc/Interv	Continued Accreditation
Surgery	Full Accreditation
Surg: Vascular	Continued Accreditation

Accredited by the American College of Radiology (ACR) Accredited by the American Dental Association (ADA)

Accredited by the American Electroencephalogram Society (AEEGS)

Accredited by the Consortium for the Accreditation of Sonographic Education (CASE) Accredited by the Council on Resident Education in OB&GYN (CREOG)

All others:

Accredited by the Accreditation Council for Graduate Medical Education (ACGME)

### **Glossary of Program Accreditation Status**

#### Accredited

Subspecialties only - A Review Committee confers the status of "Accredited" when the dependent subspecialty program has demonstrated substantial compliance with program requirements

#### **Accreditation with Warning**

Subspecialties only - A Review Committee may grant "Accreditation with Warning" when the dependent subspecialty has been found to have one or more area of non-compliance with program requirements that are of sufficient substance to require prompt correction.

#### **Continued Full Accreditation**

"Continued Full Accreditation" status is conferred when a Review Committee determines that a program continues to demonstrate substantial compliance with program requirements

#### **Favorable**

"Favorable" status is conferred when a Review Committee determines that the institution is in substantial compliance with the essential components of Graduate Medical Education

#### **Full Accreditation**

A Review Committee grants "Full Accreditation" when a program holding provisional accreditation or probationary accreditation demonstrates substantial improvement and/or compliance with program requirements

#### Initial Accreditation

"Initial Accreditation" is conferred when a Review Committee determines that a proposal for a new program substantially complies with all program requirements

#### **Probationary Accreditation**

"Probationary Accreditation" is conferred when the Review Committee determines that a program has failed to demonstrate substantial compliance with program requirements

#### **Provisional Accreditation**

New programs go through a period of "Provisional Accreditation" which implies that a program is in the developmental stage. Provisional Accreditation can be conferred when a program's accreditation was withdrawn and the program has applied to become newly accredited.

## Medical Specialty/SubspecialtyBoard Certification for Los Angeles County Department of Health Services Residents and Fellows

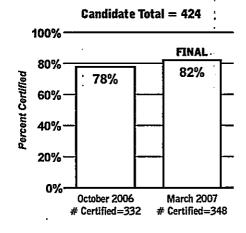
The Office of Clinical Affairs and Affiliations (OCAA) verifies the medical specialty board certification status of County-trained physicians with the American Board of Medical Specialties (ABMS) for the provision of updated results presented to your Board bi-annually.

#### Reporting Medical Specialty Board Certification

Fifteen of the 24 ABMS medical specialty member boards require two examinations, the written qualifying exam and the oral certifying exam. Nine medical specialty boards require one written certifying exam. Only eight of the 24 boards impose time limitations for initial testing upon completion of residency training. The majority of physician candidates have unlimited time to apply. Data in this report are the results of the certifying examination presented by facility, in three-year running totals. At the end of each academic year, new physician candidates are added while the earliest candidates are re-verified for a final result then eliminated from the three-year total.

The final verification of 2003 physician candidates, illustrated below, shows a 4.84% increase in certification achievement since the prior October, 2006 verification:

2003
Medical Specialty/SubspecialtyBoard Certification Achievement
Final Results as of March 2007



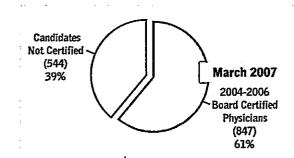
#### 2004 - 2006 Board Certification Results as of March 2007

As of March, 2007, board certification verification was completed for an aggregate total of 1,391 housestaff who completed County training programs in years 2004 through 2006. Sixty one percent of the total have achieved board certification. The following pages provide facility-specific certification results.



#### Candidate Total = 1,391

LAC+USC Medical Center — 426 Harbor-UCLA Medical Center — 230 King/Drew Medical Center — 225 Olive View-UCLA Medical Center — 72



# Medical Specialty/Subspecialty Board Certification Los Angeles County DHS Trained Residents and Fellows 2004-2006

Certification Types- General (G), Subspecialty (S)
No Candidates

## LAC+USC Medical Center

PROGRAM		2004		2005				2006		INITIAL
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Allergy & Immunology (G)				2	2	100%_				No Limit
Anesthesiology (G)	11	4	36%	15	8	53%	14	2	14%	12 Years
Pain Management (S)				1	I	100%				
Colon & Rectal Surgery (G)	2	2	100%	3	2	67%	3	0	0%	5 Years
Dermatology (G)	3	3	100%	2	2	100%	3	2	67%	No Limit
Emergency Medicine (G)	18	18	100%	18	_17	94%	17	2	12%	No Limit
Internal Medicine (G)	50	48	96%	54	47	87%	57	39	68%	No Limit
Cardiovascular Disease (S)	4	4	100%	4	4	100%	4	2	50%	
Endocrinology (S)	2	2	100%	3	3	100%	2	2	_ 100%	
Gastroenterology (S)	4	4	100%	5	5	100%_	3	3	100%	
Geriatric Medicine (S)				2	2	_100%	1	1	100%	
Hematology & Med Onc (S)	3	3	100%	3	3	100%	4	4	100%	
Infectious Disease (S)	1	1	100%	2	2	100%	2	2	100%	
Nephrology (S)	4	4	100%	4	4	100%	4	3	75%	
Pulmonary & Critical Care (S)	5	5	100%	4	3	75%_	6	3	50%	
Rheumatology (S)	2	2	100%	3	2	67%_	3	1'	33%	
Nuclear Medicine (G)				11	00	0%_	1	0	0%	No Limit
Neurology (G)	6	2	33%	5	0	0%_	1	0	0%	No Limit
Neurophysiology (S)		l.					2	0	0%	
Neurological Surgery (G)			$\square$	22	0	0%_	2	0	0%	5 Years
Obstetrics & Gynecology (G)	12	0	0%	12	0	0%_	10	0	0%	No Limit
Female Pelvic Medicine (S)				1	0	0%_	1	0	0%	
Gynecologic Oncology (S)							2	0	0%	
Maternal-Fetal Medicine (S)							11	0	0%	
Repro Endocrin & Infertility (S)	1	0	0%	1	0	0%_	1	0	0%	
Ophthalmology (G)	5	4	80%	6	4	67%_	6	0	0%	No Limit
Orthopedic Surgery (G)	11	_ 1	9%	10	0	0%	10	0	0%	No Limit
Ortho Hand Surgery (S)	2	1	50%	1	1	100%	11	0	0%	
Otolaryngology (G)	4	4	100%_	44	3	75%	4	0	0%	No Limit
Pathology (G)	4	4	100%_	6	6	100%_	12	8	67%	5 Years
Cytopathology (S)	3	2	67%	4	4	100%_	4	4	100%	
Hematopathology (S)	1	1	100%	2	0	0%_	2	0	0%	
Neuropathology (S)		<u> </u>	<u> </u>	11	11	100%				
Surgical Pathology			<u> </u>	7	7	100%	7	5	71%	
Pediatrics (G)	9	8	89%	14	12	86%_	15	11	73%	No Limit
Peds/Internal Med (G)	11	2	18%	5	4	80%_	2	0	0%	
Neonatal-Perinatal (S)	4	3	75%	2	1	50%_	2.	0	0%_	_
Plastic Surgery (G)	3	2	67%	2	1	50%_	4	. 0	0%	2 Years
Psychiatry (G)	7	2	29%	9	0	0%_	16	11	6%	No Limit
Child/Adolescent Psychiatry (S)	4	1	25%	88	1	13%_				<u></u>
Forensic Psychiatry (S)	2	0	0%_	. 3	0	0%_	4	0	0%	
Radiology (G)	10	9	90%	9	9	100%	12	11	92%	No Limit
Intervent Radiology (S)			<u> </u>				4	0	0%	
Neuroradiology (S)				1	0	0%	5	0	0%	
Radiation Oncology (G)	2	2	100%	1	1	100%	1	0	0%	No Limit
Surgery (G)	2	2	100%	8	7	87%	6	3	50%	3 Years
Surgical Critical Care (S)	1	0	0%	2	2	100%	3	3	100%	
Vascular Surgery (G)				1	0	0%	1	0	0%	No Limit
Thoracic Surgery (G)				1	1	100%	2	0	0%	5 Years
Urology (G)	3	1	33%	3	0	0%	3	O .	0%	5 Years
TOTALS	216	151	70%	257	163	63%	270	112	41%	

## Medical Specialty/Subspecialty Board Certification Los Angeles County DHS Trained Residents and Fellows 2004-2006

Certification Types- General (G), Subspecialty (S)
No Candidates

### Harbor-UCLA Medical Center

	2004				2005			2006	INITIAL	
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Anesthesiology (G)	4	1	25%	5	3	60%	4	0	0%	12 Years
Dermatology (G)							1	1	100%	No Limit
Emergency Medicine (G)	13	13	100%	13	10	77%	12	0	0%	No Limit
Family Medicine (G)	12	12	100%	12	12	100%	11	9	82%	No Limit
Sports Medicine (S)				2	0	0%	2	2	100%	
Internal Medicine (G)	16	16	100%	18	18	100%	24	18	75%	No Limit
Cardiology (S)				7	6	86%	5	4	80%	
Cards-Electrophysiology (S)							2	2	100%	
Intervent Cardiology (S)				1	1	100%	3	1	33%	
Endocrinology (S)				2	2	100%	4	4	100%	
Gastroenterology (S)	3	3	100%	1	1	100%				
Infectious Disease (S)	1	1	100%	2	2	100%	2	2	100%	
Nephrology (S)	1	1	100%				4	4	100%	
Oncology/Hematology (S)				3	3	100%	3	2	67%	
Pulmonary Disease (S)				2	2	100%	2	2	100%	
Rheumatology (S)	1	1	100%	1	1	100%				
Medical Genetics (G)				1	1	100%				No Limit
Neurology (G)	4	4	100%	2	0	0%	2	0	0%	No Limit
Neurophysiology (S)				2	0	0%	2	0	0%	
Obstetrics & Gynecology (G)	- 5	0	0%	5	0	0%	4	0	0%	No Limit
Gynecologic Urology (S)	1	0	0%				1	Ö	0%	
Maternal-Fetal Medicine (S)			7.0	1	0	0%	1	0	0%	
Orthopedic Surgery (G)	4	3	75%	3	o	0%	3	1	33%	No Limit
Foot and Ankle (S)	,		10.0	1	0	0%	1	0	0%	
Pathology (G)	4	4	100%	2	1	50%	2	0	0%	5 Years
Surgical Pathology				2	0	0%	3	2	33%	
Pediatrics (G)	10	10	100%	10	10	100%	9	5	56%	No Limit
Emergency Peds (S)				2	0	0%				
Peds Genetics (S)							1	0	0%	
Peds Infectious Disease (S)							1	0	0%	
Neonatology (S)	2	0	0%	2	0	0%	1	0	0%	
Peds Critical Care (S)				2	2	100%	2	1	50%	
Psychiatry (G)	6	3	50%	6	Ö	0%	6	0	0%	No Limit
Child/Adolescent Psychiatry (S)	1	1	100%	2	Ō	0%	3	0	0%	
Radiology (G)	5	5	100%	5	5	100%	5	5	100%	No Limit
Interventional Radiology (S)	1	0	0%				1	0	0%	
Neuroradiology (S)			1	1	0	0%	1	0	0%	
Surgery (G)	3	3	100%	4	3	75%	5	4	80%	3 Years
Vascular Surgery (G)				•			1	0	0%	No Limit
TOTALS	97	81	84%	120	80	67%	134	69	51%	

## Medical Specialty/Subspecialty Board Certification Los Angeles County DHS Trained Residents and Fellows 2004-2006

Certification Types- General (G), Subspecialty (S)
No Candidates

King/Drew	Medical	Center
1 1111 3/ 111 111		

PROGRAM		2004			2005			2006	INITIAL	
	Number of Candidates	Number Certified	% Certified	Number of Candidates		% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Anesthesiology (G)	4	3	75%	6	3	50%	3	0	0%	12 Years
Dermatology (G)	2	2	100%	2	2	100%	2	0	0%	No Limit
Emergency Medicine (G)	13	13	100%	12	9	75%	11	0	0%	No Limit
Family Medicine (G)	8	7	87%	7	7	100%	7	7	100%	No Limit
Internal Medicine (G)	13	11	85%	13	13	100%	11	9	82%	No Limit
Endocrinology (S)	2	2	100%	3	3	_100%	. 3	3	100%	
Gastroenterology (S)	1	0	0%	2	2	100%				
Geriatric Medicine (S)				5	1	20%	3	0	0%	
Infectious Disease (S)	2	1	50%_	1	1	100%	1	1	100%	
Obstetrics & Gynecology (G)	2	0	0%_	4	0	0%	1	0	0%	No Limit
Ophthalmology (G)	2	1	50%	1	1	100%	2	0	0%	No Limit
Orthopedic Surgery (G)	2	0	0%	4	0	0%				No Limit
Otolaryngology (G)				2	2	100%	1	0	0%	No Limit
Pediatrics (G)	12	6	50%	14	6	43%	13	2	15%	No Limit
Psychiatry (G)	6	0	0%	4	0	0%	7	0	0%	No Limit
Radiology (G)	5	4	80%	Durania Wildelman					No Limit	
Surgery (G)	6	5	83%	Programs Withdrawn					3 Years	
TOTALS	80	55	69%	80	50	62%	65	22	34%	

## Olive View-UCLA Medical Center

	1	2004			2005			2006	INITIAL	
PROGRAM	Number of Candidates		% Certified	Number of Candidates			Number of Candidates		% Certified	CERTIFICATION TIME LIMIT
Internal Medicine (G)	20	19	95%	19	17	89%	13	9	69%	No Limit
Hematology & Med Onc (S)	4	4	100%	1	1	100%	2	0	0%	
Int Med & Emer Med (S)	2	2	100%	1	ī	100%				
Nephrology (S)	2	2	100%	2	2	100%	3	3	100%	
Rheumatology (S)	1	1	100%	1	1	100%	1	1	100%	
TOTALS	29	28	97%	24	22	92%	19	13	68%	

- Obstetrics and Gynecology candidates, after passing the qualifying written exam, must provide unsupervised patient care for at least 12 months prior to admission to the certifying oral exam. Certification results reflect little or no change due to the additional time requirement
- 2. Orthopedic Surgery candidates must first qualify by passing the written exam. There are two certifying exams. The candidate must pass the oral exam prior to admission to the clinical on-site exam. There are little or no changes in the verification results
- 3. Surgical Pathology is not yet an ACGME-recognized fellowship nor is it an American Board of Pathology subspecialty. Surgical Pathology programs, sanctioned by the ACGME began under the auspices of Selective Pathology. In order to practice Surgical Pathology, the fellow must pass the Anatomic Pathology portion of the primary certifying exam.
- 4. Urology candidates have two qualifying requirements. After passing the written exam, candidates must engage in a minimum of 18 months of urological patient care before qualifying to sit for the certifying oral exam. Certification results reflect little or no change due to the additional time requirement

## Los Angeles County Department of Health Services Audit of Compliance with Resident Supervision Guidelines DHS Policy Number 310.2

Fiscal Year 2006-2007 July - September, 2006

In the first quarter of fiscal year 2006-07, nurses from the Department of Health Services' Quality Improvement Patient Safety Program (DHSQIPS) audited each teaching facility abstracting compliance information for seventeen inpatient indicators. The indicators, based on resident supervision guidelines, included eight surgical indicators, three ward/discharge indicators, three ICU indicators and three invasive procedure indicators.

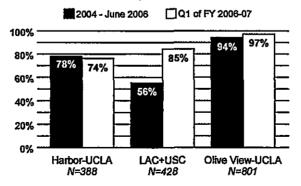
Data was collected from a sampling of hospital discharges with focus on the following services:

FACILITY	SERVICES
Harbor-UCLA	Neurology Neurosurgery
LAC+USC	General Surgery Colon & Rectal Surgery Foregut
Olive View-UCLA	Gynecology

### **Findings**

System aggregates demonstrated a significant improvement of 52% at LAC+USC, a 3% improvement at Olive View-UCLA, and a 5% decrease in improvement at Harbor-UCLA. The compliance threshold is 80%.

System Aggregates: Seventeen Inpatient Indicators 2004 - June 2006 compared with Q1 of FY 2006-07



NOTE: Sample sizes are based on the projected number of annual discharges per service

#### **Findings (continued)**

System-wide audit results for eleven indicators met or exceeded the 80% compliance threshold however, opportunities for improvement continue to exist. The threshold was not met for the three ward indicators at Harbor-UCLA and LAC+USC and, the three ICU indicators at Harbor-UCLA as follows:

#### System-wide Non-compliance with 80% Compliance Threshold

INDICATOR	Harbor	LAC+USC	Olive View
WARD-ADMIT Admissions note was signed and/ or co-signed by the Attending within 24 hours of admission	73%	77%	
WARD - DAILY Daily progress note indicates it was signed, co-signed or dis- cussed with Attending Q48 hours	53%	48%	
WARD/DISCAHRGE Documentation reflects that the Attending concurs with the dis- charge plan	65%	57%	
ICU- 4HR The resident documented that he/she discussed the patient with the Attending or supervising resident within 4 hours of admission to the ICU	79%		
ICU - ADMIT The Attending documented evaluation of the patient and discussed with the resident within 24 hours of admission to the ICU	75%	,	
ICU - DAILY The Attending documented daily evaluation of the patient or the resident documented daily evaluation that he/she discussed the case with the Attending	65%		

#### Conclusion

Each service failing to meet the 80% compliance threshold submits, to its facility governing body, corrective action plans addressing each deficiency. The "Best Practices" of services that achieve the highest compliance continue to be shared with those who fail to meet the threshold.

Facilities demonstrating the best performance and/or a greater than 15% improvement receive cash awards. These awards are released to the facility Quality Patient Care Fund or its equivalent to be used as described in the Committee of Interns and Residents' Memorandum of Understanding (if applicable) for the purchase of equipment for patient care.

#### **Next Report**

The next report will present resident supervision audit results for the second quarter (October through December, 2006) of fiscal year 2006-07.